

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

GREEN ANS STATE OF THE PROPERTY OF THE PROP

Date: Oct 15, 2021

Fill in Reporting Period dates: Beginning Date: 100 Oct		Ending Date: Oct 20, 2021	
Type of Report: (Check one)			
■ 8th day preceding preliminary ■ ■ 8th day preceding election	30 day after	er election year-end report	dissolution
lames H. Gelsman			
Candidate Full Name (if applicable) Board of Assessors		Committee Name	
Office Sought and District 64 E. Cleveland St., Greenfield		Name of Committee Treasurer	
Residential Address 3-mail: jgeisman@gmall.com	E-mail:	Committee Mailing Address	
Phone # (optional): (617) 901-2087	Phone # (option	mai):	
SUMMARY BALAN	ICE INFORM	IATION:	
Line 1: Ending Balance from previous report		0	
Line 2: Total receipts this period (page 3, line 1	1)	0	
Line 3: Subtotal (line 1 plus line 2)		0	
Line 4: Total expenditures this period (page 5, line 14)			
Line 5: Ending Balance (line 3 minus line 4)		0	
Line 6: Total in-kind contributions this period (page 6)	0	
Line 7: Total (all) outstanding liabilities (page 7	7)	0	
Line 8: Name of bank(s) used: n.a.			
Midavit of Committee Treasurer: certify that I have examined this report including attached schedules and it is, to the b ctivity, including all contributions, loans, receipts, expenditures, disbursements, in-kir nance activity of all persons acting under the authority or on behalf of this committee igned under the penalties of perjury:	nd contributions and li in accordance with th	liabilities for this reporting period and represents	
OR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 Candidate with Committee Toertify that I have examined this report including attached schedules and it is, to	the best of my knowle	edge and belief, a true and complete statement of requirements of M.G.L. c. 55. I have not receive	

Programmed SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

	Name and Residential Address (alphabetical listing required) Amount		Occupation & Employer (for contributions of \$200 or more)	
Date Received	(alphabetical listing required)	Amount	(101 CONCENDENCES OF 3200 OF INCITE)	
			(pe of Kepari (Check one)	
			tribig H. Cintriugo	
	And the state of t		hand the stood will be beautiful	
	America I destinante la campa		and the second	
	artific gallast estimates		parally landage	
	11606		snep.hemg@nemdegt	
	INFORMATION:		71/0/013	
	: 7.0117.030373	OMPLIAST 1	MINIMAGE	
0		policina	Adme to modify Malance from park	
10.			Line 3: Subscal time t plustine 2	
		70 (2 (0 C) (0 C) (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1	Life 4. Tutal Application (STOS)	
(0)		(=2ml/	Line Se Ending Billance (line 3 pp.	
1 16	6	ing) bornig and	Line 6: Total in kind contilution	
			an from brings we could be suit.	
samble og ngress the	ny kaowiedge and seiner, a mis wild entrylete stamman	stod och nu si mön	Activitie harrage embilion regerent between 1 het 70n Timmte gegen gegen begen de trees in gabeise ville	
riturgento salt tim	rpur han korrest gerreneger and nel verifikladl Guid medicil. 27 G. O. CVIII to menufaction and did also action	a faritation of the contract Charles of the contract of the	Dring and with the All John Auren mand (p.17 (A.)) in ground	
	Transition of the second second		Confinition around the production	
	(0)	part 1 Sand 7 chald	R CANODATE FRINGS ONLY: AMMARIAGE	
ine 9: Total Rece	ipts over \$50 (or listed above)	d 978 ns er ir line ich n 227 in de mine el	out as long owner, upon a communication of the first of t	
ina 10: Total Das-	nipts \$50 and under* (not listed above)		APPROVED SHE RESIDENCY AND MINER WAS SUSPENDED ON THE PARTIES. CONDITIONS WITHOUT COMMUNICATION.	
and to. Total Rece	(avore mater your curent must be endu		THE SAME REPORT IN COST AND DESIRED WHEN THE PROPERTY AND ADDRESS OF THE PROPERTY	
ine 11: TOTAL I	RECEIPTS IN THE PERIOD	0	← Enter on page 1, line 2	

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	(for contributions of \$200 or more)	
i matupat vui eigi	red and arech to mes report, it zeemonal ge number on each page.)		A Stretone Wexpenditores anacoment is avan port all expenditures. Please include your commi To Whom Paid	
22.101	abres Justinaid	maprimi, con	2027, 2021 Vistapent	
ev.ogs	tagte tovo!	meant.com	mindally parts at the	
The state of the s				
ine 9: Total Receip	ots over \$50 (or listed above)			
ine 10: Total Receip	pts \$50 and under* (not listed above)	11P+		
ine 11: TOTAL R	ECEIPTS IN THE PERIOD		Enter on page 1, line 2	

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

Paged

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, (alphabetical listing required) from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Oct 7, 2021	Vistaprint	Vistaprint.com	handout cards	101.58
Oct 12, 2021	Vistaprint	Vistaprint.com	lawn signs	300,73
				- AM 2-
		Line 12: Total Expenditu	res over \$50 (or listed above)	402.31
		Line 13; Total Expenditur	es \$50 and under* (not listed above)	3 (CSV 1 1371 371)
	Enter on page 1, line 4	→ Line 14: TOTAL EXPE	NDITURES IN THE PERIOD	402.31

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized Page 4 above.

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Control of more than \$5	Purpose of Expenditure	Amount
Value	idearintion of Concrebution	Regularita Address	Brom Wann Receiveds	november 9 41.
	nover\$50 (or here! above)	Line 12: Expenditures over \$	50 (or listed above)	
1	\$50 å, under (not hined above	Line 13: Expenditures \$50 an	d under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDI	TURES IN THE PERIOD	

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
			CSO (an lint of phone)	
			ons over \$50 (or listed above) ons \$50 & under (not listed above)	
		Line 17: TOTAL IN-KIND		

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

Page 6

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
			1	
		Line 18: TOTAL OUTSTAND	TAKE T TABLE PRINCIPLE AND TO	0

SCHEDULE D: LIABILITIES

M.G.L. 3.5 requires comminees to report ALL trabilities which have been reported previously and are still custanding, as well as those trabilities incurred during tins reporting period.

Amount.	Purpose	Address	To Whom Due	ate Incurred
				(i)
		-		